



IN THE CIRCUIT COURT OF _____ COUNTY, MISSOURI

Judge or Division:	Case Number:
	Court ORI Number:
Petitioner: Protected Child: DOB/Age of Protected Child: SSN: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race: _____ vs. _____	Respondent's Home Address: Home Phone Number: (Date File Stamp)
Respondent: Alias/Nicknames:	Respondent's Work Address: Work Phone Number: Work Hours:
Respondent's DOB: SSN (if known):	Protected Child's Relationship to Respondent: <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> Other (specify): _____

Motion for Renewal of Full Order of Child Protection

The ☐ Petitioner ☐ Guardian ☐ Juvenile Officer ☐ Guardian Ad Litem ☐ Court Appointed Special Advocate requests that the court renew the Full Order of Child Protection that was issued against Respondent on _____ (date) and terminates on _____ (date).

☐ The allegations in the petition for the order of protection still exist on this date. I still believe the protected child is in immediate and present danger of abuse.

☐ The following incidents of abuse have occurred since the date the petition was filed:

☐ Other reasons:

Pursuant to 455.516 RSMo,
☐ Petitioner ☐ Guardian ☐ Juvenile Officer ☐ Guardian Ad Litem ☐ Court Appointed Special Advocate requests that the court renew the Full Order of Child Protection for at least 180 days and not more than one year.

I swear/affirm under penalty of perjury that these facts are true according to my best knowledge and belief.

NOTICE: Section 455.510.3 RSMo. provides that a Petitioner seeking protection under the Child Protection Orders Act is not required to reveal any current address or place of residence of the child on this motion. **Do not provide this information if doing so will endanger the child.**

Date

Movant's Signature

Address (Optional)

City, State and Zip

Telephone

Attorney's Name, Missouri Bar No., if Applicable

Address

City, State and Zip

Telephone